

IFW

PTO/SB/21 (08-04)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/822,528	
	Filing Date	April 12, 2004	
	First Named Inventor	Wang, Daxiang	
	Art Unit	1621	
	Examiner Name	Unknown	
Total Number of Pages in This Submission	5	Attorney Docket Number	1856-17802 (9407.A-01)

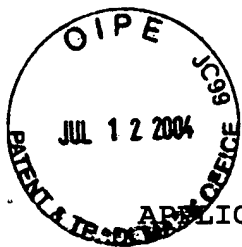
ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <i>Supplemental Application Data Sheet (4 p.) and acknowledgment postcard</i>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Or Individual Name	Jeffrey L. Johnson, Reg. No. 53,078
Signature	
Date	

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or Printed Name		Nanci D. Mohr	
Signature		Date	July 8, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and selection option 2



Supplemental Application Data Sheet

APPLICATION INFORMATION

Application No.: 10/822,528
Application Type: Regular
Subject Matter: Utility
Title: Selective Removal of Oxygen From
Syngas
Attorney Docket Number: 1856-17802 (9407.A-01)

APPLICANT INFORMATION

Applicant Authority type: Inventor
Primary Citizenship
Country: PR China
Status: Full Capacity
Given Name: Daxiang
Family Name: Wang
Name Suffix:
City of Residence: Ponca City
State or Province of Residence: Oklahoma
Country of Residence: US
Street of mailing address: 2508 Briar Ridge Rd.
City of mailing address: Ponca City
State or Province of
mailing address: Oklahoma
Country of mailing
address: US
Postal or Zip Code of
mailing address: 74604

Applicant Authority type: Inventor
Primary Citizenship
Country: US

Status:: Full Capacity
Given Name:: Harold A.
Family Name:: Wright
Name Suffix::
City of Residence:: Ponca City
State or Province of Residence:: Oklahoma
Country of Residence:: US
Street of mailing address:: 316 Warwick Road
City of mailing address:: Ponca City
State or Province of
mailing address:: Oklahoma
Country of mailing
address:: US
Postal or Zip Code of
mailing address:: 74601

Applicant Authority type:: Inventor
Primary Citizenship
Country:: France
Status:: Full Capacity
Given Name:: Beatrice C.
Family Name:: Ortego
Name Suffix::
City of Residence:: Ponca City
State or Province of Residence:: Oklahoma
Country of Residence:: US
Street of mailing address:: 2313 Chapel Hill
City of mailing address:: Ponca City
State or Province of
mailing address:: Oklahoma
Country of mailing
address:: US
Postal or Zip Code of
mailing address:: 74604

Applicant Authority type:: Inventor
Primary Citizenship
Country:: US
Status:: Full Capacity
Given Name:: Sinh Han
Family Name:: Trinh
Name Suffix::
City of Residence:: Ponca City
State or Province of Residence:: Oklahoma
Country of Residence:: US
Street of mailing address:: 903 E. Central
City of mailing address:: Ponca City
State or Province of
mailing address:: Oklahoma
Country of mailing
address:: US
Postal or Zip Code of
mailing address:: 74601

Applicant Authority type:: Inventor
Primary Citizenship
Country:: Peru
Status:: Full Capacity
Given Name:: Rafael L.
Family Name:: Espinoza
Name Suffix::
City of Residence:: Ponca City
State or Province of Residence:: Oklahoma
Country of Residence:: US
Street of mailing address:: 1469 N. Prentice Road
City of mailing address:: Ponca City
State or Province of
mailing address:: Oklahoma
Country of mailing

address:: US
Postal or Zip Code of
mailing address:: 74604

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 31889

REPRESENTATIVE INFORMATION

Representative Customer Number:: 31889

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	<u>60/353,822</u>	01/31/02
	60/353,774		03/12/02
And	10/219,108		08/15/02

ASSIGEE INFORMATION

Assignee name:: ConocoPhilips Company
Street of mailing address:: 600 North Dairy Ashford
City of mailing address:: Houston
State or Province of
mailing address:: TX
Country of mailing
address:: US
Postal or Zip Code of
mailing address:: 77079